



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Wolfgang Beyer et al.  
Serial No. : 10/511,378  
Filed : July 12, 2005  
For : LIGHT APPLICATOR AND METHOD FOR PRODUCING A DIFFUSER  
Examiner : Kianni C. Kaveh  
Art Unit : 2883

\*\*\*\*\*

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

Date : September 15, 2006  
By : Bolesh J. Skutnik  
Signature : *Bolesh J. Skutnik*

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REVOCATION AND NEW POWER OF ATTORNEY

Commissioner of Patents  
P.O. Box 1450, Alexandria, VA 22313-1450

Sir:

Enclosed please find a replacement power of attorney signed by an authorized representative of the clinical center of the university, granting power of attorney to Bolesh J. Skutnik.

I trust that, with the filing of the above document, all previous powers of attorney will be removed and the correspondence address for all future communications will be that on the replacement Power of Attorney submitted with this letter and given below. Thank you for your attention to this matter.

Respectfully submitted,

*Bolesh J. Skutnik*

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Dated: September 15, 2006

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PTO/SB/82 (01-06)

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**REVOCATION OF POWER OF  
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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/511,378
Filing Date	July 12, 2005
First Named Inventor	Wolfgang Beyer
Art Unit	2883
Examiner Name	Kianni C. Kaveh
Attorney Docket Number	new BJA412T

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

28184

Please change the correspondence address for the above-identified application to:

The address associated with  
Customer Number:

28184

OR

Firm or  
Individual Name: Bolesh J. Skutnik, PhD, JD

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**Xing  
SIGNATURE of Applicant or Assignee of Record**

Signature: *Xing Marchionini* REC'D. IN THE MAILROOM  
Name: *Xing Marchionini* 1100 3777 Mailbox  
Date: *10.7.06* Telephone: *0049-89 2095-2099*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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